

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 25, 2002 8:00 am**  
**Secretary of State**

06-25-2002 90437 048 \*\*\*\*61.25

**DOCUMENT # N50324**

1. Entity Name

**THE WOODLANDS AT CAROLINA HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

% UNITED COMMUNITY MGMT  
 3300 UNIVERSITY DR., #405  
 CORAL SPRINGS FL 33065  
 US

% UNITED COMMUNITY MGMT  
 3300 UNIVERSITY DR., #405  
 CORAL SPRINGS FL 33065  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0354970**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UNITED COMMUNITY MGMT CORP**  
**3300 UNIVERSITY DR., #405**  
**CORAL SPRINGS FL 33065**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	ERB, ELIZABETH	3181 BAYBERRY WAY	MARGATE FL 33063	<input type="checkbox"/>
VPD	ESPOSITO, LORI ANN	3078 BAYBERRY WAY	MARGATE FL 33063	<input checked="" type="checkbox"/>
VD	CARLEY, BRENDA	3150 BAYBERRY WAY	MARGATE FL 33063	<input type="checkbox"/>
SD	PITTERSON, JANET	3060 BAYBERRY WAY	MARGATE FL 33063	<input type="checkbox"/>
TD	SCHINELLI, JOHN	3084 BAYBERRY WAY	POMPANO BEACH FL 33063	<input checked="" type="checkbox"/>
	<i>m. mustes</i>			<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
TD	Muster, Mara	3144 Bayberry way	Margate, FL 33063	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VD	Brenda Carley	3150 Bayberry Way	Margate FL 33063	<input type="checkbox"/>	<input type="checkbox"/>
SD	Evans, Tredy	3138 Bayberry way	Margate, FL 33063	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<i>Randy G...</i>			<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elizabeth Erb* **ELIZABETH ERB**

3/15/02

344-2462

CR2E037 (9/01)